#### Case 17-10669-MBK Doc 62 Filed 03/26/21 Entered 03/26/21 16:42:11 Desc Main Document Page 1 of 7

Fill in this information to identify your case:					
Debtor 1	Miguel E. Cunha				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW JE	RSEY TRENTON VICINAGE		
Case number	17-10669-MBK				
(if known)					

Check if this is an amended filing

12/15

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

info	as complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amendor original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	129,900.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	28,578.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	158,478.00
Par	t 2: Summarize Your Liabilities		
			abilities It you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	290,595.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	5,581.00
	Your total liabilities	\$	296,176.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,847.45
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,748.84
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	hedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 Miguel E. Cunha Case number (if known) 17-10669-MBK

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_6,715.49

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

## Case 17-10669-MBK Doc 62 Filed 03/26/21 Entered 03/26/21 16:42:11 Desc Main Document Page 3 of 7

Fill	in this information to identify your	case:		
De	btor 1 Miguel E. 0	Cunha		
	btor 2 ouse, if filing)			
Un	ited States Bankruptcy Court for the	ne: DISTRICT OF NEW	JERSEY TRENTON VICINAGE	
	se number 17-10669-MBK		_	Check if this is:
(IT KI	nown)			<ul> <li>An amended filing</li> <li>A supplement showing postpetition chapter</li> <li>13 income as of the following date:</li> </ul>
0	fficial Form 106I			MM / DD/ YYYY
S	chedule I: Your Inc	come		12/15
atta		. On the top of any addit		on about your spouse. If more space is needed, I case number (if known). Answer every question  Debtor 2 or non-filing spouse
	If you have more than one job,		■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation		
	Include part-time, seasonal, or self-employed work.	Employer's name	HMS Paint Products	University of Pennsylvania
	Occupation may include studen or homemaker, if it applies.	t Employer's address		
		How long employed t	there?	
Pa	rt 2: Give Details About M	onthly Income		
	imate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to report for any	ine, write \$0 in the space. Include your non-filing
	ou or your non-filing spouse have e e space, attach a separate sheet		ombine the information for all empl	oyers for that person on the lines below. If you need
				For Debtor 1 For Debtor 2 or non-filing spouse

Official Form 106I Schedule I: Your Income page 1

5,064.86

5,064.86

0.00

+\$

\$

3.

4.

3,649.84

3,649.84

0.00

List monthly gross wages, salary, and commissions (before all payroll

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

deductions). If not paid monthly, calculate what the monthly wage would be.

Deb	otor 1	Miguel E. Cunha		(	Case	number (if known)	17	-10669-N	/IBK	
					For	Debtor 1		or Debtor		
	Сор	y line 4 here	4.		\$	5,064.86	\$		,649.84	_
5.	l iet	all payroll deductions:								_
J.	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	1,237.07	\$		652.48	
	5b.	Mandatory contributions for retirement plans	5k		\$ -	0.00	\$		0.00	_
	5c.	Voluntary contributions for retirement plans	50		\$-	0.00	\$		364.98	_
	5d.	Required repayments of retirement fund loans	50		\$	0.00	\$		0.00	_
	5e.	Insurance	56		\$	0.00	\$		549.54	_
	5f.	Domestic support obligations	5f	·.	\$	0.00	\$		0.00	_
	5g.	Union dues	50	g.	\$	0.00	\$		0.00	=
	5h.	Other deductions. Specify: Commuter Transit	5ł	Դ.+	\$_		+ \$		167.01	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,237.07	\$	1	,734.01	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,827.79	\$	1	,915.83	_
8.	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
	O.L	monthly net income. Interest and dividends	8a 8b		\$ \$	0.00	\$		0.00	_
	8b. 8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.			\$_ \$	0.00	\$		0.00	-
	8d.	Unemployment compensation	80		\$	0.00	\$		0.00	_
	8e.	Social Security	86	Э.	\$	0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f		\$_	0.00	\$		0.00	_
	8g.	Pension or retirement income	80	_	\$_	0.00	\$		0.00	_
	8h.	Other monthly income. Specify: Income tax refund (1/12th)	8r	Դ.+	\$_	103.83	+ \$		0.00	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	. [	\$	103.83	\$		0.0	0
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		3,931.62 + \$		1,915.83	]_[\$	5,847.45
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		σ,931.02 · · · ·		1,313.03	]	3,047.43
11.	Inclu othe Do r	e all other regular contributions to the expenses that you list in Schedular contributions from an unmarried partner, members of your household, your friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are no cify:	ur dep			•		Schedul	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certies							\$	5,847.45
13.	Do s	you expect an increase or decrease within the year after you file this form	m?						Combi monthl	ned ly income
		No.  Ves Evolain								

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify yo	our case:				
Deb	tor 1 Miguel E. Cu	nha		Che	ck if this is:	
					An amended filing	
1	tor 2					ving postpetition chapter
(Spo	ouse, if filing)				13 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the:	DISTRICT OF NEW JERSEY TRE VICINAGE	ENTON	-	MM / DD / YYYY	
	e number 17-10669-MBK nown)					
	fficial Form 106J					
So	chedule J: Your I	Expenses				12/15
info nur	ormation. If more space is neo nber (if known). Answer ever	•				
Par 1.	t 1: Describe Your House Is this a joint case?	hold				
	No. Go to line 2.	ur a computata la completa la 10				
	Yes. <b>Does Debtor 2 live i</b>	n a separate nousenoid?				
	☐ No ☐ Yes. Debtor 2 mus	st file Official Form 106J-2, Expenses	s for Separate Household	of Deb	otor 2.	
2.	Do you have dependents?	□ No				
	Do not list Debtor 1 and Debtor 2.	■ Yes. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.		Daughter		15	■ Yes
						□ No
						Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
3.	Do your expenses include expenses of people other the yourself and your dependent					<b>1</b> 100
Par	t 2: Estimate Your Ongoin	ng Monthly Expenses				
exp	imate your expenses as of your expenses as of a date after the bolicable date.	our bankruptcy filing date unless y pankruptcy is filed. If this is a supp	ou are using this form a demental <i>Schedule J</i> , ch	as a su heck th	ipplement in a Cha ne box at the top o	apter 13 case to report f the form and fill in the
the	value of such assistance and	non-cash government assistance i d have included it on <i>Schedule I:</i> )	f you know /our Income		Your expe	ansas
(Of	ficial Form 106l.)				i oui oxpi	550
4.	The rental or home ownersh payments and any rent for the	hip expenses for your residence. I e ground or lot.	nclude first mortgage	4. \$	<b>.</b>	1,345.06
	If not included in line 4:					
	4a. Real estate taxes			4a. \$	<b>.</b>	0.00
	4b. Property, homeowner's			4b. \$		0.00
		pair, and upkeep expenses		4c. \$	·	100.00
5		ion or condominium dues ents for vour residence, such as ho	me equity loans	4d. \$	·	0.00

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Debtor 1	Miguel E. Cunha	Case num	ber (if known)	17-10669-MBK
6. <b>Utilitie</b>	es:			
6a.	Electricity, heat, natural gas	6a.	\$	200.00
6b.	Water, sewer, garbage collection	6b.	\$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.	Other. Specify: Cell phone	6d.	\$	150.00
	and housekeeping supplies		\$	800.00
. Childo	care and children's education costs	8.	\$	0.00
. Clothi	ng, laundry, and dry cleaning	9.	\$	200.00
	nal care products and services	10.	\$	100.00
	al and dental expenses	11.	·	100.00
	portation. Include gas, maintenance, bus or train fare.		·	
	include car payments.	12.	\$	600.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
4. Charit	able contributions and religious donations	14.	\$	0.00
5. <b>Insura</b>	ince.		· -	
Do not	include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	0.00
15c.	Vehicle insurance	15c.	\$	300.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specif		16.	\$	0.00
7. Install	ment or lease payments:			<u></u>
	Car payments for Vehicle 1	17a.	\$	468.78
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	·	0.00
	payments of alimony, maintenance, and support that you did not report a			
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106)		\$	0.00
9. Other	payments you make to support others who do not live with you.	•	\$	0.00
Specif	y:	19.		
0. Other	real property expenses not included in lines 4 or 5 of this form or on Sc	hedule I: Yo	ur Income.	
20a.	Mortgages on other property	20a.	\$	0.00
20b.	Real estate taxes	20b.	\$	0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d.	Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e.	Homeowner's association or condominium dues	20e.	\$	0.00
1. Other:	Specify: Auto maintenance	21.	+\$	65.00
Pet ca			+\$	60.00
1 61 6	ai <del>c</del>		- Ψ	00.00
	late your monthly expenses			
22a. A	dd lines 4 through 21.		\$	4,748.84
22b. C	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
22c. A	dd line 22a and 22b. The result is your monthly expenses.		\$	4,748.84
				.,. 10101
	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.		5,847.45
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	4,748.84
	Subtract your monthly expenses from your monthly income.	00-	·	1,098.61
	The result is your monthly net income.	23c.	Ф	1,090.01
For exa	u expect an increase or decrease in your expenses within the year after ample, do you expect to finish paying for your car loan within the year or do you expect you ation to the terms of your mortgage?			ease or decrease because of a
_				
modification				

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Fill in this infor	mation to identify your	case:		
Debtor 1	Miguel E. Cunha			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY TRENTON VICINAGE	
_	17-10669-MBK			
(if known)				Check if this is an
				amended filing

Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone wh	no is NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)
Inder penalty of perjury, I declare that I h nat they are true and correct. X /s/ Miguel E. Cunha	ave read the summary and schedules filed with this declaration and
Miguel E. Cunha Signature of Debtor 1	Signature of Debtor 2
Date <b>March 26. 2021</b>	Date